

1. Purpose

The purpose of this policy is to set out how each academy in the trust will fulfil its statutory duty to make arrangements for supporting students/pupils at each academy with medical conditions. The policy follows the guidance published by the DfE in December 2015 'Supporting pupils at school with medical conditions'¹

This policy is restricted to students/pupils with an ongoing medical condition. Minor or short term or one-off medical problems are covered by the separate First Aid and Medical Policy (Policy H7).

2. Aim

The key aim of the Trust and each of its academies is to help all students/pupils – including those with medical conditions - to achieve their very best and become successful, well-rounded individuals.

3. Objectives

The objectives of the Trust in respect of supporting students/pupils with medical conditions are:

- To identify and provide for students/pupils who have medical conditions;
- To support the student/pupils in order to increase their confidence and promote self care;
- To develop and maintain a good understanding of how medical conditions impact on a child's or young person's ability to learn
- To provide support and advice for all staff working with student/pupils with medical conditions;
- To develop and maintain a partnership approach and high levels of engagement with parents;
- To ensure access to the curriculum for all students/pupils.

4. Procedures to be followed when notification is received that a student/pupil has a Medical Condition

Each academy in the Trust will ensure that the correct procedures are followed whenever notification is received that a student/pupil has a medical condition. The procedures will include any transitional arrangements between schools, the process to be followed upon reintegration or when a student/pupil's needs change and arrangements for any staff training and support.

For children and young people starting at one of the Trust's academies, arrangements will be in place in time for the start of the relevant school term. In other cases, such as a new diagnosis or children moving to an academy mid-term, every effort will be made to ensure that arrangements are put in place within two weeks.

In making the arrangements, the academy will:

- take into account that many of the medical conditions that require support at the academy will affect quality of life and may be life-threatening with some instances more obvious than others;
- focus on the needs of each individual child or young person and how their medical condition impacts on their academy life;
- ensure that arrangements give parents, carers and student/pupils confidence in the academy's ability to provide effective support for medical conditions in the academy;
- show an understanding of how medical conditions impact on a child's or a young person's ability to learn, as well as increase their confidence and promote self-care;

¹ <https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>

- ensure that staff are aware of the potential social problems that pupils with medical conditions may experience and use this knowledge, alongside the academy Preventing Bullying policy, to help prevent and deal with any problems. Opportunities such as PSHE and science lessons will be used to raise awareness of medical conditions to help promote a positive environment;
- ensure that arrangements are clear and unambiguous about the need to support actively students/pupils with medical conditions to participate in trips and visits, or in sporting activities and not prevent them from doing so, making arrangements for the inclusion of pupils in such activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not possible.

Staff will be properly trained to provide the support that students/pupils need and they should liaise with the academy's nurse to ensure that best practice is followed.

The academy does not have to wait for a formal diagnosis before providing support to students/pupils. In cases where a student/pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on the available evidence. This would normally involve some form of medical evidence and consultation with parents. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place. This will normally be led by the academy Principal.

5. Individual health care plans

5.1 Overview

Individual Health Care Plans exist to document a child's or young person's medical needs and the provision being made for those needs. They are a tool to ensure that the academy meets the needs of the child or young person by providing clarity about what needs to be done, when and by whom. They also set out the procedures to follow in an emergency, and the arrangements to be followed during day trips, residential visits and sporting activities. They are written with input from all the relevant parties including the academy nurse, healthcare professional and parent.

IHCPs will be developed with child's or young person's best interests in mind and will ensure that the academy assesses and manages risks to the child's or young person's education, health and social well-being and minimises disruption. IHCPs will be reviewed at least annually or earlier if evidence is presented that the child's or young person's needs have changed.

All children with a diagnosis of an allergy and at risk of anaphylaxis must have a written Allergy Management Plan.

Not all children or young people will require an IHCP. The academy, healthcare professional and parent should agree, based on evidence, when an IHCP would be inappropriate or disproportionate. If a consensus cannot be reached, the academy Principal is best placed to take a final view.

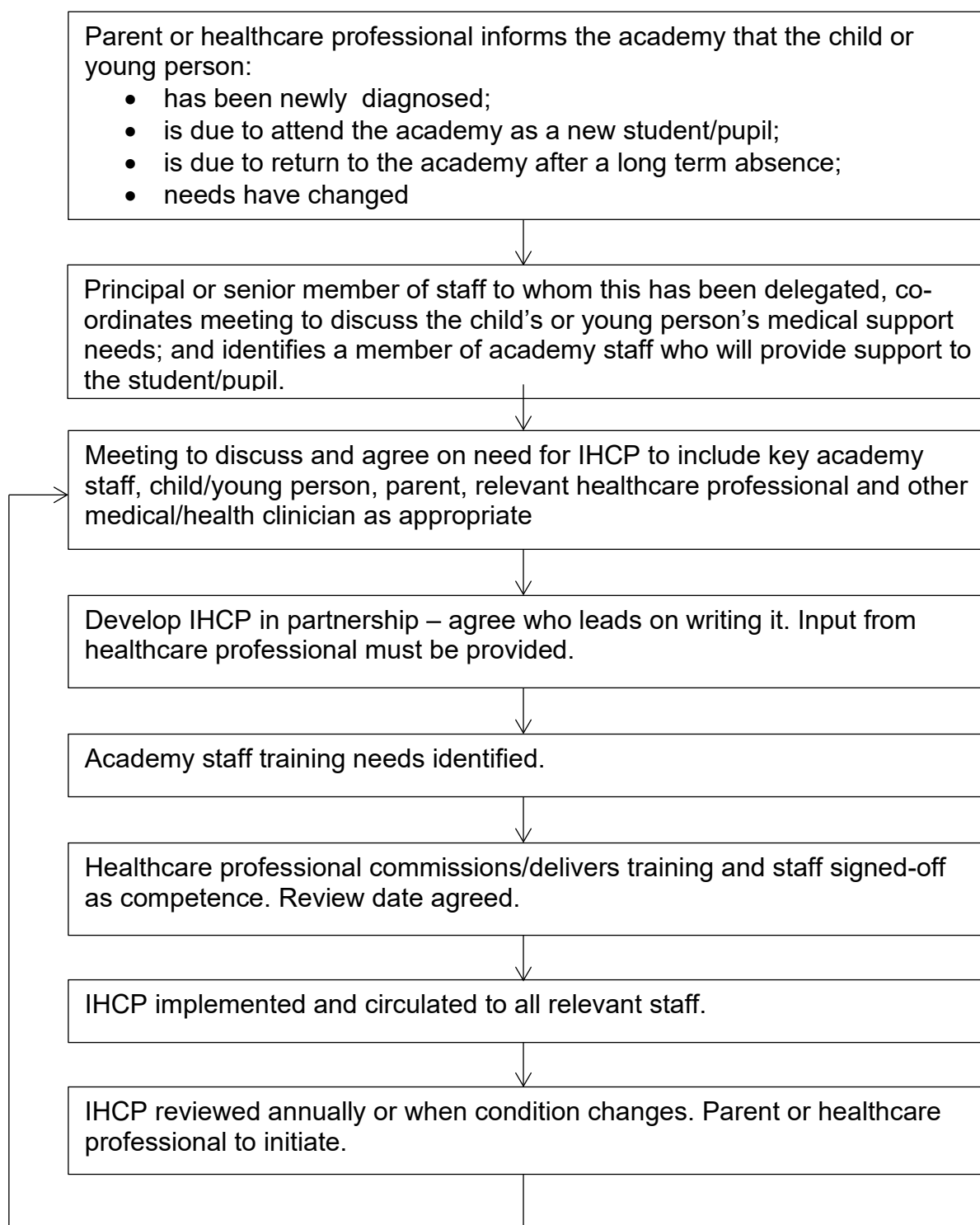
5.2 IHCP template

An Individual Health Care Plan template is provided in **Appendix 1** for use if an alternative form has not been provided by the Health Care Professional involved

Where a pupil has no other healthcare needs other than a risk of anaphylaxis, academies may wish to consider using the British Society for Allergy and Clinical Immunology (BSACI) Allergy Action Plan [Paediatric Allergy Action plans](#)

5.3 Process for developing IHCPs

The flowchart summarises the process for identifying and agreeing the support a child or young person needs, and developing an IHCP.



6. Roles and responsibilities

6.1 *Principal*

The **Principal** of each academy has responsibility for:

- ensuring that the 'Supporting students/pupils with medical conditions policy' is fully implemented within the academy;
- ensuring that the academy works positively and in close partnership with parents and children / young people in supporting their medical needs;
- ensuring all staff are aware of the policy and understand their role in its implementation
- ensuring that all staff who need to know are aware of the child's or young person's condition;

- ensuring that sufficient trained numbers of staff are available to implement the policy and deliver against all individual health care plans, including in contingency and emergency situations;
- ensuring that academy staff are appropriately insured and are aware that they are insured to support students/pupils in this way;
- contacting the school nursing service or academy nurse in the case of any child who has a medical condition that may require support at the academy.

Principals also have overall responsibility for the development of IHCPs.

6.2 Board of Trustees

The Trust's **Board of Trustees**, through its Education & Standards Committee, has responsibility for:

- overseeing and monitoring the appropriate implementation of this policy across the Trust, ensuring statutory requirements are fulfilled.

6.3 Academy staff

Academy staff have responsibility for:

- providing support to students/pupils with medical conditions, including the administering of medicines (although they cannot be required to do so);
- taking into account the needs of students/pupils with medical conditions that they teach;
- undertaking sufficient and suitable training and achieving the necessary level of competency before they take on responsibility to support children or young people with medical conditions;
- knowing what to do and responding accordingly when they become aware that a student/pupil with a medical condition needs help.

6.4 Academy nurse

The academy will either have an employed nurse or access to school nursing services. The academy nurse has responsibility for:

- notifying the academy when a child or young person has been identified as having a medical condition which will require support in the academy;
- supporting staff in the implementation of a child's individual healthcare plan, including provision of advice and liaison, for example on training (although they would not usually have an extensive role in ensuring that the academy is taking appropriate steps to support children or young people with medical conditions);
- liaising with lead clinicians locally or community nursing teams on appropriate support for the child or young person and associated staff training needs.

6.5 Other healthcare professionals

Other healthcare professionals (including GPs and paediatricians) have responsibility for:

- notifying the academy nurse when a child or young person has been identified as having a medical condition that will require support at the academy;
- providing advice on developing IHCPs.

6.6 Students/pupils

Students/pupils with medical conditions have responsibility for:

- providing information about how their condition affects them;
- being fully involved in discussions about their medical support needs
- contributing as much as possible to the development of, and compliance with, their IHCPs.

Other students/pupils have responsibility for being sensitive to the needs of those with medical conditions.

6.7 Parents

Parents have responsibility for:

- providing the academy with sufficient and up-to-date information about their child's medical needs;
- being involved in the development and review of their child's IHCP;
- carrying out any actions they have agreed to as part of the implementation of the IHCP (for example, providing medicines and equipment and ensuring they or another nominated adult are contactable at all times).

6.8 Local authorities

Local authorities have responsibility for:

- commissioning school nurses for maintained schools and academies;
- promoting co-operation between relevant partners.

6.9 Providers of health services

Providers of health services have responsibility for:

- co-operating with schools that are supporting children and young people with a medical condition, including appropriate communication;
- liaising with the academy nurse and other healthcare professionals such as specialist and children's community nurses;
- participating in locally developed outreach and training;
- providing support, information, advice and guidance to schools, and their staff, to support children with medical conditions at school.

6.10 Clinical commissioning groups

Clinical commissioning groups have responsibility for:

- commissioning other healthcare professionals such as specialist nurses;
- ensuring that commissioning is responsive to children's and young people's needs, and that health services are able to co-operate with schools supporting children with medical conditions;
- being responsive to local authorities and schools seeking to strengthen links between health services and schools, and consider how to encourage health services in providing support and advice;
- providing a forum for local authorities and CCGs to consider with other partners, including locally elected representatives, how to strengthen links between education, health and care settings.

7. The child's or young person's role in managing their own medical needs

The Trust and its academies aim to develop independence in students/pupils and to prepare them for adult life. Consequently, if it is deemed, after discussion with the parents, that a child or young person is competent to manage their own health needs and medicines, the academy will encourage them to take responsibility for managing their own medicines and procedures. This will be reflected within the IHCP.

Wherever possible, children and young people should be allowed to carry their own medicines and relevant devices or should be able to access their medicines for self-medication quickly and easily (these will be stored in the cupboard in the Medical Room to ensure that the safeguarding of other children is not compromised). The academy also recognises that children and young people who can take their medicines themselves or manage procedures may require an appropriate level of supervision. No access is given to the Medical Room without adult supervision. If a child or young person is not able to self-medicate then relevant staff should help to administer medicines and manage procedures for them.

If a child or young person refuses to take medicine or carry out a necessary procedure, staff should not force them to do so but instead follow the procedure agreed in the IHCP. Parents should be informed, outside of the review, so that alternative options can be considered.

8. Managing medicines on academy premises

The Trust's procedures for managing medicines, including record keeping, can be found in the First Aid and Medical Policy.

9. Unacceptable practice

Although staff in each academy in the Trust should use their discretion and judge each case on its merits with reference to the child's or young person's IHCP, it is not generally acceptable practice to:

- prevent children or young people from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assume that every child or young person with the same condition requires the same treatment;
- ignore the views of the child / young person or their parents; or ignore medical evidence or opinion, (although this may be challenged);
- send children or young people with medical conditions home frequently or prevent them from staying for normal academy activities, including lunch, unless this is specified in their IHCPs;
- if the child or young person becomes ill, send them to the medical room unaccompanied or with someone unsuitable;
- penalise children or young people for their attendance record if their absences are related to their medical condition e.g. hospital appointments;
- prevent children or young people from drinking, eating or taking toilet breaks whenever they need to in order to manage their medical condition effectively;
- require parents, or otherwise make them feel obliged, to attend the academy to administer medication or provide medical support to their child, including toileting issues;
- prevent children or young people from participating, or create unnecessary barriers to children or young people participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child.

10. Liability and indemnity

Each academy will ensure that an appropriate level of insurance is in place which appropriately reflects the level of risk. This will normally be achieved through participation in the DfE's Risk Protection Arrangements.

Details of the insurance arrangements are accessible to staff in the academy who are providing support to children or young people with medical conditions.

11. Complaints

Any complaint in relation to this policy or the academy's implementation of it should be raised in accordance with the Trust's Complaints Policy and Procedure.

12. Policy status and review

Written by:	Director of Governance and Admissions
Owner:	Director of Governance and Admissions
Status:	V3 = Approved
Approval date:	Approval history available on request V3 = Education and Standards Committee 11.10.2022
Next review date:	T3-4 2024/25
Review history	Reviewed September 2022 – minor change regarding staff awareness of potential bullying issues

Appendix 1 – Individual Health Care Plan Template

Academy Information	
Academy:	
Who is responsible for providing support in the academy:	
Child's / Young Person's Information	
Name:	
Group / class / form:	
Date of birth:	
Address:	
Medical diagnosis or condition:	
Date:	
Review date:	
Family Contact Information	
Name:	
Relationship to child:	
Phone number (work):	
Phone number (home):	
Phone number (mobile):	
Name:	
Relationship to child:	
Phone number (work):	
Phone number (home):	
Phone number (mobile):	
Clinic/Hospital Contact Information	
Name:	
Phone number:	
GP	
Name:	
Phone number:	

<i>Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc</i>
<i>Name of medication, dose, method of administration, when to be taken, side effects, contraindications, administered by/self-administered with/without supervision</i>
<i>Daily care requirements</i>
<i>Specific support for the student/pupil's educational, social and emotional needs</i>
<i>Arrangements for school visits/trips etc</i>
<i>Other information</i>
<i>Describe what constitutes an emergency, and the action to take if this occurs</i>
<i>Who is responsible in an emergency (state if different for off-site activities)</i>
<i>Plan developed with</i>
<i>Staff training needed/undertaken – who, what, when</i>
<i>Form copied to</i>